

ARIZONA DEPARTMENT OF HEALTH SERVICES DIVISION OF BEHAVIORAL HEALTH SERVICES DIVISION DOCUMENT REVISION NOTICE

The Arizona Department of Health Services/Division of Behavioral Health Services has revised the below referenced document(s), indicated by **BOLD** print and the symbol **[X]**. The attached memorandum includes a detailed description of the changes impacting the selected document(s). The revised document(s) will be posted to the ADHS/DBHS website on or around January 1, 2009. Please direct any questions regarding this Division document revision notice to Janice Hippe at (602) 364-4655 or via electronic mail at hippej@azdhs.gov.

DIVISION DOCUMENT	ADHS/DBHS PROVIDER MANUAL	ADHS/DBHS POLICY AND PROCEDURES MANUAL	ADHS/DBHS PROGRAM SUPPORT PROCEDURES MANUAL	ADHS/DBHS COVERED BEHAVIORAL HEALTH SERVICES GUIDE
REVISION [X]				[X]
DIVISION DOCUMENT	CLIENT INFORMATION SYSTEM (CIS) FILE LAYOUT AND SPECIFICATIONS MANUAL	OFFICE OF GRIEVANCE AND APPEALS DATABASE MANUAL	ADHS ACCOUNTING AND AUDITING PROCEDURES MANUAL	FINANCIAL REPORTING GUIDE FOR REGIONAL BEHAVIORAL HEALTH AUTHORITIES
REVISION [X]				
DIVISION DOCUMENT	ADHS/DBHS QUALITY MANAGEMENT/UTILIZATION MANAGEMENT PLAN	ADHS/DBHS PREVENTION FRAMEWORK FOR BEHAVIORAL HEALTH	AHCCCS MEDICAL POLICY MANUAL-CHAPTERS 900 AND 1000	ADHS/DBHS STRATEGIC PLAN
REVISION [X]				
DIVISION DOCUMENT	ADHS/DBHS CULTURAL COMPETENCE PLAN	ADHS/DBHS CLINICAL GUIDANCE DOCUMENTS	TITLE XIX CHILDREN'S BEHAVIORAL HEALTH ANNUAL ACTION PLAN	
REVISION [X]				

**Arizona Department of Health Services
Division of Behavioral Health Services
Memorandum**

Date: December 31, 2008
To: Stakeholders
From: Margaret Russell, Bureau Chief of Policy
Re: **Final Changes to the ADHS/DBHS Covered Behavioral Health Services Guide**

The following is a summary of the final revisions to the ADHS/DBHS Covered Behavioral Health Services Guide, Version 6.6. The final revisions will be posted to the ADHS/DBHS website on or around January 1, 2009. Please note that the changes described in this Memorandum represent the **FINAL** changes that are to be implemented by Tribal and Regional Behavioral Health Authorities and their contracted behavioral health providers.

Throughout Guide

1. Hyperlinked and updated references made to the B2 Matrix, ADHS/DBHS policies and procedures, and Federal and State rules.
2. Added “must specify where” to every place of service (POS) 99 (other) referenced in the guide.
3. Made minor grammatical changes.
4. Corrected references to “covered services” and the “ADHS/DBHS Covered Services Guide” to read “covered behavioral health services” and “ADHS/DBHS Covered Behavioral Health Services Guide”.

Please note: Due to the number of minor changes incorporated throughout the guide, it is suggested that holders of the guide replace the ADHS/DBHS Covered Behavioral Health Services Guide in its entirety.

Section I.A. Purpose

1. After 1st paragraph, added 2nd bullet to read: “Focusing services to meet recovery goals.”

Section I.E.1. AHCCCS Registered Providers

1. Updated and corrected AHCCCS Provider Registration Unit contact information.

Section I.E.2. DHBS-Only Registered Providers

1. Updated ADHS/DBHS phone number in last paragraph.

Section I.F.5. Group Billing

1. Changed section title from “Group Billing” to “Group Payment ID”.

2. Throughout paragraphs 1 and 2, changed references to “group billing” to read “group payment” or “group payment ID”.

Section 1.F.7.a. General Core Billing Limitations

1. Added 2nd sentence to billing limitation #4 to read: “Providers must indicate begin and end times on all progress notes”.

Section I.F.9. Claim Information

1. Updated AHCCCS Website address.

Section II.A.2. Code Specific Information

1. Removed CPT code 90885- Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes.

Section II.D. Support Services

1. 5th bullet after 1st paragraph, corrected category title “HCTC” to “Home Care Training to Home Care Client (HCTC)”.

Section II.D.4. Billing Limitations

1. Deleted reference to footnote 4 on page 91 in billing limitation 3.
2. Changed 2nd sentence to read: “The exception is, however, providers other than the inpatient, residential facility or day program can bill self help/peer services provided to the person residing in and/or transitioning out of the inpatient or residential settings or who is receiving services in a day program”.

Section II.D.5. Provider of Services to Adults

1. 1st bullet after 1st paragraph changed “Adult Therapeutic Foster Home” to “Behavioral Health Therapeutic Home”.

Section II.D.8. Sign Language or Oral Interpretive Services

1. Under Service Standards/Provider Qualifications, bolded the statement “**Providers of oral interpretive services of any language must be available free of charge to Title XIX/XXI eligible persons, persons determined to have a Serious Mental Illness and potential enrollees to ensure appropriate delivery of covered behavioral health services.**”
2. Under State Funded HCPCS Codes, changed T1013 code description from “Sign Language or Oral Interpretive Services” to “Sign Language or Oral Interpretive Services, per 15 minutes”.
3. Under Billing Unit, changed “Not Applicable” to “15 minutes”.

Section II.D.10. Transportation

1. Under General Definition, 1st sentence, added “medically necessary” in reference to “covered behavioral health services”.
2. Under General Definition, added last sentence to read: “Odometer readings are required when billing transportation services”.

Section II.G.3. Mental Health Services NOS (Room and Board)

1. Under General Definition, added last sentence to read: “This code may also be encountered to report bed hold/home pass days in Level II and Level III facilities”.

Appendix B-2, ADHS/DBHS Allowable Procedure Code Matrix:

1. Updated transportation rates
2. End dated CPT code 90885 effective 7/1/08
3. Changed allowable units on CPT code 90847 to 2
4. Corrected HCPCS Code H2015 text from 6 hours to 5 hours
5. Added Place of Service (POS) 11 (Office) and 56 (Psychiatric Residential Treatment Center) to CPT codes 99367 and 99368 effective 1/1/08

REPLACE APPENDIX B-2

Appendix B-5, Billing Limitations Matrix:

No changes made.

Summary of Replacement Appendices and Page Numbers

Section	Replace
Covered Behavioral Health Services Guide	Due to the number of minor changes incorporated throughout the guide, it is suggested that holders of the guide replace the ADHS/DBHS Covered Behavioral Health Services Guide in its entirety.
Appendix B-2	Entire Appendix